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Substitute for form 1449A/PTO				Complete if Known	
				Application Number	10/559,595
				Filing Date	11/30/05
				First Named Inventor	Ong, John
				Art Unit	1654
				Examiner Name	HARLE, Jennifer I.
(Use as many sheets as necessary)				Attorney Docket Number	0501US-UTL1
Sheet	1	of	2		

U. S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document Country Code ³ , Number ⁴ , Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		WO02/098348	12-12-2002	Eli Lilly (Defelippis)		

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional). 2 See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. 3 Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4 For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. 5 Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. 6 Applicant is to place a check mark here if English language Translation is attached.

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Substitute for form 1449B/PTO				Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				<i>Application Number</i>	10/559,595
				<i>Filing Date</i>	11/30/05
				<i>First Named Inventor</i>	Ong, John
				<i>Art Unit</i>	1654
				<i>Examiner Name</i>	HARLE, Jennifer I.
Sheet	2	of	2	<i>Attorney Docket Number</i>	0501US-UTL1

NON PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

1 Applicant's unique citation designation number (optional). **2** Applicant is to place a check mark here if English language Translation is attached.

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